

JAN 07 2004  
PATENT & TRADEMARK OFFICE

Please type a plus sign (+) inside this box ☐

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Express Mail No.: ER543239675US</b>	<b>Attorney Docket No.</b>	75352-001	<b>First Inventor:</b> Dennis R. Thomas
<b><u>AMENDMENT TRANSMITTAL LETTER</u></b>  <b>Title:</b> Multi-Purpose Vessel and Method for Recovering, Storing and/or Offloading Material in a Dredging Operation		<b>Serial No.</b>	09/486,280
		<b>Filing Date</b>	2-24-2000
		<b>Examiner</b>	Janice L. Krizek
		<b>Group Art Unit</b>	3652

**TO THE ASSISTANT COMMISSIONER FOR PATENTS:**

Transmitted herewith is an amendment in the above-identified application.

☐ Large Entity Status

☒ Small Entity status of this application has been established under 37 CFR 1.27

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED – PART II						SMALL ENTITY		OTHER THAN SMALL ENTITY	
		(Column 1)		(Column 2)	(Column 3)				
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	31*	Minus	**45	=0	x \$9.00=		x \$18.00=	
	Independent (37 CFR 1.16(b))	2*	Minus	**6*	=0	x \$43.00=		x \$86.00=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					x \$145.00=		x \$290.00=	
						TOTAL ADDIT. FEE	0	TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

☒ Petition of Extension of Time.

☐ No additional fee is required for amendment.

☐ A check in the amount of the fee is enclosed.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. 08-3460.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-3460.  
I have enclosed a duplicate copy of this sheet.

☒ Any additional filing fees required under 37 C.F.R. 1.16.

☒ Any patent application processing fees under 37 C.F.R. 1.17.

  
Signature

Date: 1-7-2004

Robert C. Haldiman, Reg. No. 45,437  
Husch & Eppenberger, LLC  
190 Carondelet Plaza  
St. Louis MO 63105-3441  
309-637-4900  
309-637-4928 FAX  
Custom No.: 029493

Certificate of Express Mailing

I hereby certify that this document and fee is being deposited with the United States Postal Service as "Express Mail" under 37 C.F.R. 1.10 Label No ER543239675US on 1-7-2004 and addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

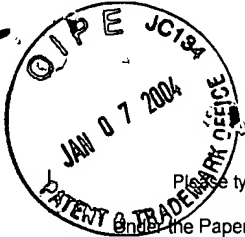
Signature: 

Type Name: Robert C. Haldiman

RECEIVED

JAN 13 2004

GROUP 3600



01-08-03

3652 \$

Please type a plus sign (+) inside this box →



PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	09/486,280	
	<b>Filing Date</b>	2-24-2000	
	<b>First Named Inventor</b>	Dennis R. Thomas	
	<b>Group Art Unit</b>	3652	
	<b>Examiner Name</b>	Janice L. Krizek	
<b>Total Number of Pages in This Submission</b>	16	<b>Attorney Docket No.</b>	75352-001

<b>ENCLOSURES (check all that apply)</b>		
<input type="checkbox"/> Charge Deposit Account -08-3460 <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> Affidavits/declarations(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Petition For Revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b))	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Request To Rescind Previous Nonpublication Request <input type="checkbox"/> Response to Notice of Allowability <input checked="" type="checkbox"/> Other Enclosure(s): Check and Postcard
<b>Remarks:</b> <input checked="" type="checkbox"/> Commissioner is hereby authorized to charge fees in this application and any fees which may be required, or any overpayment, to Deposit Account 08-3460. I have enclosed a duplicate copy of this sheet		

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>	
<b>Firm or Individual Name</b>	Robert C. Haldiman, Reg. No. 45,437
<b>Signature</b>	
<b>Date</b>	1-7-2004

**RECEIVED**  
**JAN 13 2004**  
**GROUP 3652**

<b>CERTIFICATE OF EXPRESS MAILING</b>			
<b>Express Mail No. ER543239675US</b>			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as Express Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			<b>date:</b> 1-7-2004
<b>Typed or printed name</b>	Robert C. Haldiman		
<b>Signature</b>		<b>Date</b>	1-7-2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Mail Stop Comments - Patents, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.